

C1 0820

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER Brantly Development first name TOWN Fulton

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Soil, Brown Shale, Gray Rock, and water at 359'.

GROUTING RECORD. WELL HAS BEEN GROUTED (Y). TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC). NO. OF BAGS: 10. NO. OF POUNDS: 1000.

CASING RECORD. MAIN CASING TYPE: PL (PLASTIC). Nominal diameter: 6 inch. Total depth of main casing: 35 feet.

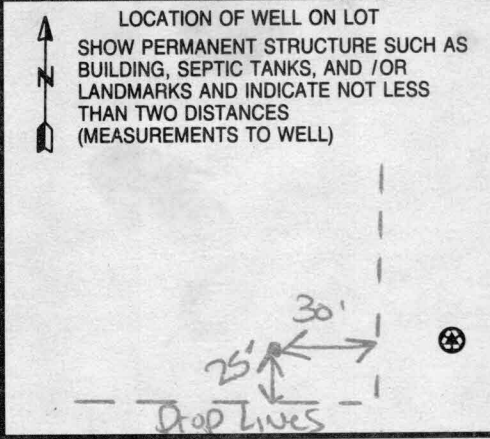
OTHER CASING (if used) table with columns for diameter and depth.

SCREEN RECORD. screen type or open hole: HO (OPEN HOLE). insert appropriate code below.

DEPTH (nearest ft.) table with columns for casing sections and screen diameter.

PUMPING TEST. HOURS PUMPED: 3. PUMPING RATE: 15.00 gal. per min. METHOD USED TO MEASURE PUMPING RATE: submersible.

PUMP INSTALLED. DRILLER INSTALLED PUMP (YES). TYPE OF PUMP INSTALLED: S (submersible). CAPACITY: GALLONS PER MINUTE.



NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED: Y.

CIRCLE APPROPRIATE LETTER: A (A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED).

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. MS D 162. DRILLERS SIGNATURE: [Signature]. LIC. NO. DW 766.

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

Date Received (APA) \_\_\_\_\_

**OWNER INFORMATION**

8 MM DD YY 13

Brantly Development  
15 Last Name Owner First Name 34

8835 N. Columbia 100 Pkwy  
36 Street or RFD 55

Columbia MD 21045  
57 Town 70 State 72 Zip 76

B 3 **LOCATION OF WELL**

Howard  
8 COUNTY 21

Lime Kiln Valley  
23 SUBDIVISION 42

SECTION \_\_\_\_\_ LOT 24  
44 46 48 50

Fulton  
52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 M I  
73 76 77 78

**DRILLER INFORMATION**

Michael D. Isom M S D 162  
Driller's Name 76 License No. 81

G. Edgar Harr Sons' Corp.  
Firm Name

12047 Falls Road, Cockeysville 21030  
Address

6/11/07  
Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Lime Kiln Road  
11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 300 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 FT

TAX MAP: 40 BLK: 22 PARCEL 114

B 2 **WELL INFORMATION**

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5  
8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750  
14 20

**USE FOR WATER** (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22  I INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME COUNTY NO. AS19589

STATE SIGNATURE \_\_\_\_\_ INSERT S →

DATE ISSUED 10/2/07 DATE 41

43 MM DD YY 48 CO SIGNATURE [Signature] EXP. DATE

NORTH GRID 482 000 EAST GRID 810 000  
50 55 57 63

APPROXIMATE DEPTH OF WELL 250 FEET  
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

**METHOD OF DRILLING** (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)

37 CABLE REVerse-ROTary DRive-POINT

other \_\_\_\_\_

**REPLACEMENT OR DEEPEMED WELLS** (CIRCLE APPROPRIATE BOX)

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39  S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D THIS WELL WILL DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 \_\_\_\_\_ 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER HD 2004 G 01 3(02)

PERMIT No. HD-95-1274  
70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- well
- 
- 

WRITE THE BOX NUMBER FROM THE MAP HERE 810

E 810

N 482

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

# HARR WELL DRILLING

12047 FALLS ROAD  
COCKEYSVILLE, MD 21030  
410-252-4588

## HOWARD COUNTY WELL YIELD TEST REPORT

Date Test Performed: 11-16-07  
Address: Lime Kiln Road  
Owner: Brantly Development  
Well Depth: 400 Ft

Permit Number: HO-95-1274  
Subdivision: Lime Kiln Valley L#24  
Election District:  
Static Water Level: 32 Ft

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 5gallon bucket	Calculated Flow-Gallons Per Minute
1200	32 ft		17 sec	17.64
1215	165		20	15.00
1230	196		20	15.00
1245	215		20	15.00
1300	230		20	15.00
1315	234		20	15.00
1330	234		20	15.00
1345	234		20	15.00
1400	234		20	15.00
1415	234		20	15.00
1430	234		20	15.00
1445	234		20	15.00
1500	234		20	15.00

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WELL & SEPTIC PROGRAM  
TEL: (410)313-1771 FAX: (410)313-2648**

**Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping**

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Tri-County Pump Service Inc Telephone #: 301-432-0330  
Address: 6711 Old National Rd  
Baltimore, MD 21112

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:  
Name (Print): William Gault License # 20135

\*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Craftmark Home Telephone #: 703-932-0573  
Subdivision: Monte Vista Lot #: 24 Well Tag #: HO-95-1274  
Site Address: 12895 Lincoln Rd  
Highland, Md 20777

<b>Submersible Pump Data</b>	<b>Pitless Adapter</b>	<b>Well Cap and Electric Conduit</b>
Make: <u>HYMcDonald</u>	Make: <u>American Granby</u>	Two piece watertight cap: <u>Y</u>
Model #: <u>23100V/254</u>	Model #: <u>PI 800</u>	Screened, vented well cap: <u>Y</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36</u> (36" min)	Cap secured to casing: <u>Y</u>
Well Yield: <u>15</u> GPM	NSF/WSC approved: <u>Y</u>	Conduit min 18" B.G.: <u>Y</u>

Depth of well encountered at time of pump installation: 400 (feet) Conduit secured to well cap: Y  
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used- Must circle one  
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

<b>Piping to house</b>	<b>House Connection</b>
Type: <u>PV</u>	PVC sleeve to undisturbed soil at wall penetration: <u>Y</u>
PSI: <u>160</u> (160 psi min)	Length of sleeve (5' minimum from foundation): _____
Depth of supply line: <u>36</u> (36" min)	Sleeve sealed properly: <u>Y</u>

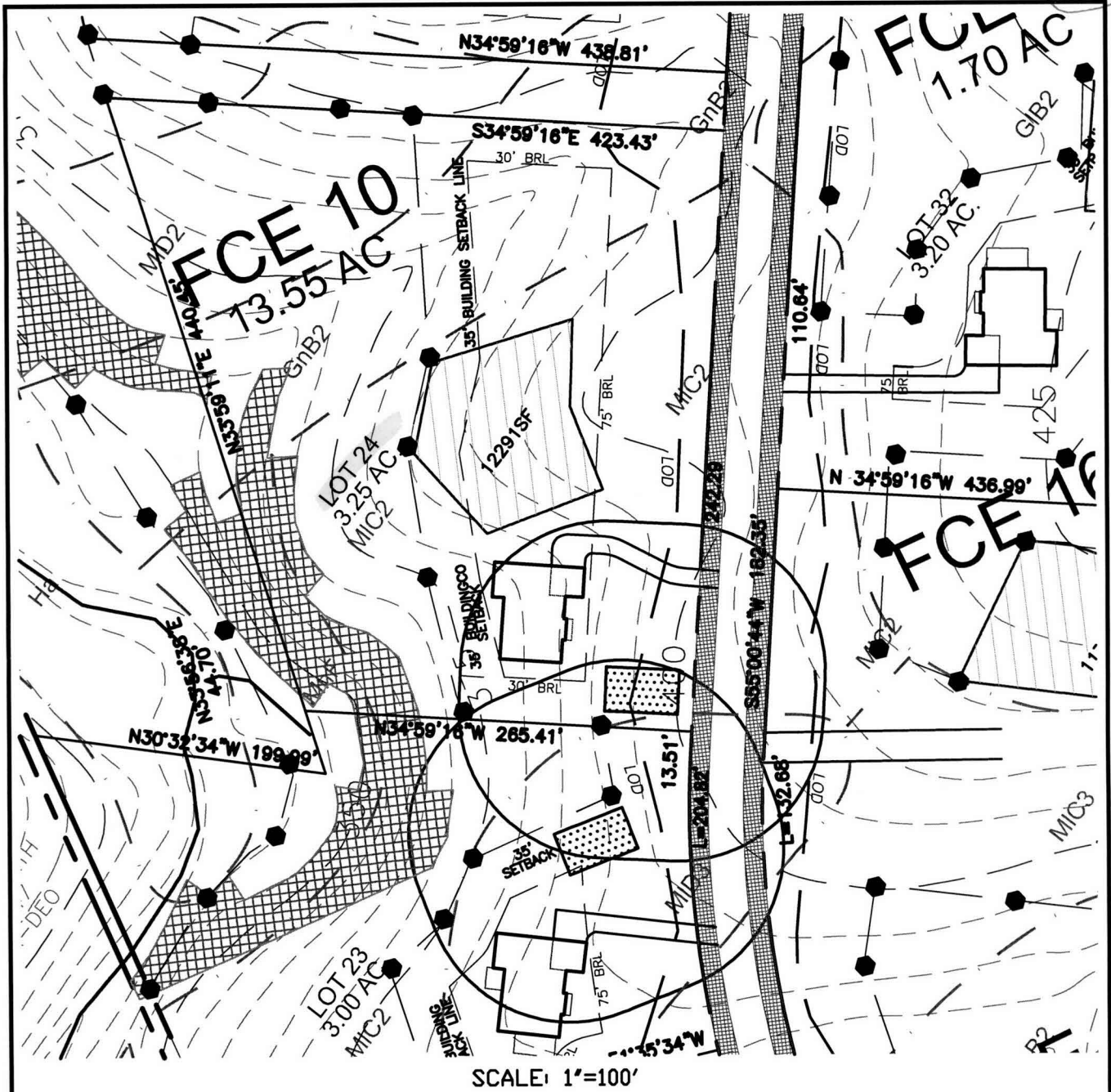
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: William Gault date: 3-29-2011

**For Health Department Use Only - Not to be completed by Installer**

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 3/29/12 Inspector: RB  
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade Y  
Two piece cap installed and attached to casing securely Y  
Elec. conduit extends at least 18" below grade/attached to cap properly Y  
Safety rope not outside of well cap/casing Y  
Correct well tag attached properly and casing 8" above finished grade Y  
Water supply line sleeved adequately at house connection Y  
Adequate grout observed below pitless adapter Y

10/2/07 Well Box OK(S)



SCALE: 1"=100'

**ROBERT H. VOGEL ENGINEERING, INC.**  
 ENGINEERS • SURVEYORS • PLANNERS  
 8407 MAIN STREET TEL: 410.461.7666  
 ELLICOTT CITY, MD 21043 FAX: 410.461.8961

WELL PLAT LEGEND	
	SEPTIC EASEMENT
	PROPOSED WELL AREA

SCALE: \_\_\_\_\_ AS SHOWN  
 DRAWN BY: \_\_\_\_\_ JCO  
 CHECKED BY: \_\_\_\_\_ RHV  
 DATE: \_\_\_\_\_ JUNE 2007  
 PROJECT NO.: \_\_\_\_\_ 04-21  
 SHEET NO. \_\_\_\_\_ 1 OF 1

LIME KILN VALLEY II  
 PHASE 1 & 2 (LOT 24)

PROPOSED WELL LOCATION EXHIBIT

TAX MAP 40 & 45  
 5TH ELECTION DISTRICT

PARCEL 114 & 12  
 HOWARD COUNTY, MARYLAND

3.2301

112  
ELEV. 387.00

413  
ELEV. 387.00

35' SETBACK

111  
ELEV. 386.00

PROP. SEPTIC  
EASEMENT  
10,172 SQ. FT.

110  
ELEV. 396.00

109  
ELEV. 396.50

MaD

522 SQ. FT. OF SEPTIC  
AREA TO BE ADDED

108  
ELEV. 400.00

2,902 SQ. FT.  
OF SEPTIC  
AREA REMOVED

GgB

108A  
ELEV. 402.00

107  
ELEV. 397.50

INV. = 392.82'

79-  
W/O  
T  
RICK  
60/  
58

CONS.

75' BRL

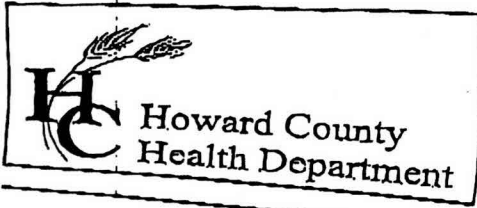
388  
390  
392  
394  
396  
398

04  
44

1,322,950

INV = 403.1

NE



7178 Columbia Gateway Drive, Columbia, MD 21046  
 (410) 313-2640 Fax (410) 313-2640  
 TDD (410) 313-2323 Toll Free 1-866-313-2640  
 website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

**TO ALL INTERESTED PARTIES**

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

Well Site Location:

Subdivision/Property Name	Lot#	Road Name
Lime Kiln Valley	1-39	Lime Kiln Valley

The well site has been staked by <sup>Sites</sup> Robert Vogel Inc,  
 (professional land surveyor or company employing professional land surveyors)  
 on 7/24/07 (date) and does not require a site inspection.

The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 3/11/05

Bureau of Environmental Health  
7178 Gateway Drive Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300

Peter L. Beilenson, M.D., M.P.H., Health Officer

## **INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – November 22, 2012**

May 22, 2012

Homeowner  
12895 Lime Kiln Valley  
Highland, Maryland 21075

**RE: Lime Kiln Valley II, Lot # 24  
12895 Lime Kiln Valley  
Building Permit: B11003161  
Well Permit: HO-95-1274**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **5/10/2012**. Final approval of the well line connection to the dwelling was granted on **3/29/2012**. The well construction was completed on **11/20/2007**. Water samples were collected on **05/04/2012**.

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-1274. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the *Annotated Code of Maryland, Environment Article, 9-1311*, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:

<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,

Dana Bernard, REHS/RS  
Environmental Sanitarian  
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits  
Community Hygiene Program  
File



# Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Ventrie Court • P.O. BOX 245 • Myersville, MD 21773 • 800-332-3340 • FAX 301-293-2368  
www.fredericktownelabs.com • info@fredericktownelabs.com

## Certificate of Analysis

Acct. No. 3948 - 730-1

### Field Record

Site visit performed on: Friday, May 04, 2012 11:05 AM  
by: Chris Moor State ID No. 4644CM  
Affiliation: Tri-County Pump Service  
Property Owner: Craftmark Homes  
Property Address: 12895 Lime Kiln Rd  
Lot 24  
Highland, MD

Sample Source: Kitchen Sink  
Field pH: 6.8  
Res. Cl.: 0.0 mg/l

### Laboratory Report

Sample Received at laboratory: 5/4/2012 4:02 PM

#### Bacteriological results:

Total Colif. (/100ml)	E.coli.(/100ml)	Start		End		Method	Analyst
		Date	Time	Date	Time		
<1	<1	05/04/12	16:33	05/05/12	16:45	9223B	MM

Bacteriological analysis of this sample indicates the water is safe for human consumption and meets state and local requirements. Analysis was performed according to the 20th edition of Standard Methods

#### Inorganic Chemical results:

Parameter	Result Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen	<0.2 mg/l	10	5/4/2012	300.0	PH
Radon In Water	See Report				NB
Sand	<2 mg/l	5	5/7/2012	0.065mmFilter	JD
Turbidity	0.2 NTU'	10	5/4/2012	180.1	KMW

*OK*  
*DB 5-22-12*

Reported by: Kathy Ryan 5/10/12  
Name Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory  
Maryland Cert. No. 116 Virginia Cert. No. 00444  
MDOT WBE Cert. No.: 91-158

PARTNERS IN QUALITY

Fredericktowne

ENVIRONMENTAL TESTING

MD: 116  
VA: 141 / WV: 9924-M

Labs Inc.



BENCHMARK

Analytics, Inc.

Center Valley, PA  
NELAC Certified PA-DEP: 38-00401  
NJ: PA028 • NY: 11827 • MD: 315 • WV: 9953-C  
Sayre, PA  
NELAC Certified PA-DEP: 08-00380  
NJ: PA038 • NY: 11216 • MD: 313

Fredericktowne Labs, Inc. ■ 3020 Ventrie Court ■ P.O. Box 245 ■ Myersville, MD 21773 ■ www.fredericktownelabs.com  
301-293-3340 ■ 301-694-7133 ■ FAX 301-293-2366 ■ Info@fredericktownelabs.com

TEST REPORT 12051006

3948-730-1, 12895 Lime Kiln Road, Lot 24, Highland

Page 1

SAMPLE: 3948-730-1-1, Kitchen Sink  
SAMPLED BY: C. Moor

Lab ID: 12051006-001

Test	Result	Method	SLOQ	Analysis Start	Analysis End	Analyst *
FieldSampler	C. Moor	Field Parameters				
SampTech	G	Field Parameters				

SAMPLE: 3948-730-1-1, Kitchen Sink  
SAMPLED BY: C. Moor

Lab ID: 12051006-001A

Grab

Sample Time: 05/04/2012 11:00

Test	Result	Method	SLOQ	Analysis Start	Analysis End	Analyst *
Radon	1466 pCi/L	RN SM7500Rn B		05/08/12 10:45	05/08/12	NLB-CV

Handwritten note: 1466 pCi/L with a question mark and a circled result.

REMARKS:

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of NELAP unless otherwise noted on the Analytical Report.

\* CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

RN The counting error of 2 sigma is listed as the uncertainty

MANAGER

Handwritten signature: Chi Mei

DATE: 5/10/2012